


## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	AIR-GAP INSULATED INTERCONNECTIONS		
Application Type : regular, utility			
Attorney Docket Number : BUR920040143US1			
Correspondence address:			
Customer Number:		30449	
Inventors Information:			
<u>Inventor 1:</u>			
<b>Applicant Authority Type:</b>	Inventor		
<b>Citizenship:</b>	US		
<b>Given Name:</b>	Brent		
<b>Middle Name:</b>	A.		
<b>Family Name:</b>	Anderson		
<b>Residence:</b>			
<b>City of Residence:</b>	Jericho		
<b>State of Residence:</b>	VT		
<b>Country of Residence:</b>	US		
<b>Address-1 of Mailing Address:</b>	221 Cilley Hill Road		
<b>Address-2 of Mailing Address:</b>			
<b>City of Mailing Address:</b>	Jericho		
<b>State of Mailing Address:</b>	VT		
<b>Postal Code of Mailing Address:</b>	05465		
<b>Country of Mailing Address:</b>	US		
<b>Phone:</b>			
<b>Fax:</b>			
<b>E-mail:</b>			
<u>Inventor 2:</u>			
<b>Applicant Authority Type:</b>	Inventor		
<b>Citizenship:</b>	US		
<b>Given Name:</b>	Andres		
<b>Family Name:</b>	Bryant		

**Residence:**

**City of Residence:** Underhill  
**State of Residence:** VT  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 407 Route 15  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Underhill  
**State of Mailing Address:** VT  
**Postal Code of Mailing Address:** 05489  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 3:**

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Jeffrey  
**Middle Name:** P.  
**Family Name:** Gambino  
**Residence:**  
**City of Residence:** Westford  
**State of Residence:** VT  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 98 Huntley Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Westford  
**State of Mailing Address:** VT  
**Postal Code of Mailing Address:** 05494  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 4:**

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Anthony  
**Middle Name:** K.  
**Family Name:** Stamper  
**Residence:**  
**City of Residence:** Williston

**State of Residence:** VT  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 46 Evergreen Drive  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Williston  
**State of Mailing Address:** VT  
**Postal Code of Mailing Address:** 05495  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Attorney Information:**

practitioner(s) at Customer Number:

30449



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

**Assignee 1:**

**Organization Name:** International Business Machines Corporation  
**Address-1 of Mailing Address:** New Orchard Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Armonk  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 10504  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**